PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

108/0064

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	-	CLAIMS A	S FILED - PART I (Column 1) (Co			lumn 2)		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			97		,		١	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TO	OTAL CHARGE	ABLE CLAIMS	22 minus 20=		* 2]	X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			3 1	ninus 3 =	*	* 6		X43=			X86=	
Мι	JLTIPLE DEPE	NDENT CLAIM P	RESENT				1 +		 	OR	7.00-	0
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	L	+145=		OR	+290=	0
CLAIMS AS AMENDED - PART II								TOTAL	L	OR	TOTAL	806
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	
		CLAIMS		HIGHE		T	1 _		ADDI-	7 1	*	ADDI
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	*	Minus			.=		X\$-9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=		1	X86=	
٥	FIRST PRESENTATION OF MULTIPL			DEPENDENT C						OR		·
		٠						+145=		OR	+290=	
	•							TOTAL DDIT. FEE		OR Z	TOTAL ODIT. FEE	
(Column 1) (Column 2) (Column 3)												
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE] [RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	, ,,,,
AME WE	Independent	*	Minus	***		=		X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7.00-	
								+145=	· .	OR	+290=	
٠								TOTAL DIT. FEE		OR A	TOTAL DDIT: FEE	
(Column 1) (Column 2) (Column 3)												
O	`	CLAIMS —REMAINING		HIGHE — NUMBE		-PRESENT		T	ADDI-	Γ	Т	ADDI-
AMENDMENT		AFTER AMENDMENT		PREVIOU PAID FO	JSLY	EXTRA ·	f		IONAL FEE		RATE	TIONAL FEE
Š.	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=	
AM	Independent		Minus	***		=		<43=	, ,		X86=	
	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR -		
						•	+	145=		OR	+290=	
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							TOTAL IT. FEE	·	OR A	TOTAL DIT. FEE	
TI	tne "Highest Nur ne "Highest Num	nber Previously Pai ber Previously Paid —	d For" IN THIS For" (Total or	S SPACE is I Independent	ess than) is the l	3, enter "3." nighest number				, AL		